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Ur	Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.										
	PATENT APPLICATION FEE DETERMINATION RECORD Substitute for Form PTO-875  Application or Docket Number 991900937										
	CLAIMS AS FILED - PART I (Column 1) (Column 2)					SMALL	NTITY	OR		R THAN ENTITY	
	FOR NUMBER FILED NUMBER EXTRA			RATE	FEE		RATE	FEE			
	BASIC FEE (37 CFR 1.16(a))					s	OR		\$		
	AL CLAIMS CFR 1.16(c))		minus 20	<u>.</u>		ŀ	x \$=		OR	x s=	
	EPENDENT CLAIR CFR 1.16(b))	MS	minus 3	= •			x \$ =		OR	x \$=	
MUI	TIPLE DEPENDE	NT CLAIM PRESEN	NT (37	7 CFR 1.16(d))			+\$ =		OR	+\$ =	
• If 1	he difference in o	column 1 is less that	an zero, ent	er "0" in column	2.		TOTAL		OR	TOTAL	
	C	LAIMS AS AM	ENDED -	- PART II				<u> </u>			<del></del>
		(Column 1)		(Column 2)	(Column 3)		SMALL E	ENTITY	OR		R THAN ENTITY
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
ENDMENT	Total (37 CFR 1.16(c))	. 6	Minus	" 27	* Ø		x \$=		OR	x \$=	\
1EN	Independent (37 CFR 1.16(b))	· 2	Minus	<sup></sup> 3	= 10		x \$=		OR	x \$=	1
AM	FIRST PRESENT	ATION OF MULTIPL	E DEPENDEI	NT CLAIM (37 CF	R 1.16(d))		+\$=		OR	+ \$=	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)				-		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
DMI	Total (37 CFR 1.16(c))	•	Minus	**	=		x \$=	_	OR	x \$=	
1EN	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=		OR	x \$=	
AN	FIRST PRESENT	ATION OF MULTIPL	E DEPENDEN	NT CLAIM (37 CF	R 1.16(d))		+\$=		OR	+\$ =	
							TOTAL ADD'L FEE		OR	TOTAL ADD'L FEE	
		(Column 1)		(Column 2)	(Column 3)						X
ENTC		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
)ME	Total (37 CFR 1.16(c))	•	Minus	**	=		x <b>s</b> =	, ,,	OR	x \$=	
AMENDMENT	Independent (37 CFR 1.16(b))	•	Minus	***	=		x \$=	"	OR	x \$=	
AM	FIRST PRESENT	ATION OF MULTIPLE	E DEPENDEN	VT CLAIM (37 CF	R 1.16(d))		+\$ =		OR	.+ \$ =	
	TOTAL TOTAL ADD'L FEE OR ADD'L FEE										
		olumn 1 is less tha					•		J.	ADDEFEE	
••	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20". *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".										

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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pplication or (	Oocket Number
UE=30	7/
NTITY	OTHER TH

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

. CLAIMS A	(Column 1)	(Column 2)
TOTAL CLAIMS	23	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	23 minus 20=	· 3
INDEPENDENT CLAIMS	3 minus 3 =	. 9

\* If the difference in column 1 is less than zero, enter "0" in column 2

**MULTIPLE DEPENDENT CLAIM PRESENT** 

## **CLAIMS AS AMENDED - PART II**

	A14	(Colu	(1 nm		(Column 2)	(Column 3)
ENTA		REMA AF	NIMS UNING TER DMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
MON	Total	. 2	7	Minus	- 28	= 4
ME	Independent	. /	25	Minus	2	=
4	FIRST PRESE	NTATIO	N OF M	ULTIPLE D	EPENDENT CLAIR	М

		(Column 1)		(Column 2)	(Column 3)			
ENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
ENOME	Total	. 27	Minus	- 27	= 05			
AME	Independent	. 3	Minus	··· 3	=10			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							

		(Column 1)		(Column 2)	(Column 3)
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
ğ	Total	. 4	Minus	- 27	= Ø:
Z	Independent	. 2	Minus	··· 3	= G.
4	FIRST PRESE	NTATION OF M	ULTIPLE D	EPENDENT CLAIN	

" If the entry in column 1 is less than the entry in column 2, write "0" in column 3.

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

	SMALL ENTITY TYPE			OTHER THAN SMALL ENTITY		
	RATE	FEE		RATE	FEE	
	BASIC FEE	355.00	OR	BASIC FEE	710.00	
	X\$ 9=		OR	X\$18=	SY	
	X40=		OR	X80=		
	+135=		OR	+270=		
•	TOTAL .	•	OR	TOTAL	764	

		OTHER THAN
SMALL ENTITY	OR	SMALL ENTITY

RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
·	FEE			FEE
X\$ 9=		OR	X\$18=	72.00
X40=		OR	X80=	
+135=		OR	+270=	
TOTAL	,	OR	TOTAL	720)

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		ÓR	X\$18=	\
X40≖		OR	.X80=	:
+135=		OR:	+270=	
TOTAL		OR	TOTAL ADDIT FEE	/

RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
X\$ 9=		OR	X\$18=	
X40=	1	OR	X80=	
+135=		OR	+270=	
TOTAL ADDIT, FEE		OR	TOTAL ADDIT, FEE	